| | EC 2 0 2005 | this form, together w | ith applicable fee(| s), to: <u>Mail</u> or Fax | Mail Stop ISSU Commissioner P.O. Box 1450 Alexandria, Vii (571) 273-2885 | JE FEE for Patents rginia 22313-1450 | |
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| | | | | | | son M. Cowan | (Depositor's name) |
| FC:1501 FC:1504 | | 1400.00 OP 300.00 OP | | | | n. n. uowan (Signature) | |
| | APPLICATION NO. | FILING DATE | Filhon | | December 20, 2005 (Oate) | | |
| <u> </u> | 09/808,684 | | FIRST | FIRST NAMED INVENTOR | | ATTORNEY DOCKET NO. | CONFIRMATION NO. |
| TTI | 09/808,684 03/15/2001 TITLE OF INVENTION: MULTI-FREQUENCY TON | | Dicter Schulz | | | 50626.19 | 5285 |
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| | JAMAL, ALEXANDER | | 2643 | | 379-390020 | j | |
| Į. | ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. ☐ "Foe Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required. | | | (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed. | | | |
| | | RESIDENCE DATA TO B | | | • | | |
| 3. A | 3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type) PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filling an assignment. | | | | | | without has been filed for |
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| Zarl: Pleas 4a. T S S The I NOT | A) NAME OF ASSIGNI INK Semicon se check the appropriate the following fee(a) are of 20 Issue Fee 3 Publication Fee (No sr 1) Advance Order - # of pange in Entity Status (2) a. Applicant claims SN 20 Issue Fee and Public The Issue Fee an | assignee category or categor enclosed: mall entity discount permitted Copies (from status indicated above) MALL ENTITY status. See 3's requested to apply the Issue ablication Fee (if required) wirds of the United States Pater | (B) RES. On ta | n the patent): tent of Fee(s): cbeck in the amyment by credit te Director is he it Account Num Applicant is no c (if any) or to re | anada Individual Caracard Form PTO-2038 reby authorized by at her50 1 3 5 3 onger claiming SMAI -apply any previously on the applicant; a regis | prporation or other private groclosed. is attached. harge the required fee(s), or of cenclose an extra control of the control | up entity Government redit any overpayment, to py of this form). |
| Zarl: Pleas 4a. T 5. Cl The I NOT intere | A) NAME OF ASSIGNI INK Semicon se check the appropriate he following fcc(a) are of Issue Fee Publication Fee (No sr Advance Order - # of Isange in Entity Status (a. Applicant claims Sh Director of the USPTO is E: The Issue Fee and Puest as shown by the recon uthorized Signature pped or printed name | assignee category or categor coclosed: mall entity discount permitted Copies (from status indicated above) MALL ENTITY status. See 3 s requested to apply the Issue ablication Fee (if required) wirds of the United States Pater Joseph R. Ke | (B) RES. On ta | IDENCE: (CITY ario, Ca in the patent): tent of Fee(s): check in the amount by credit the Director is he it Account Num Applicant is no c (if any) or to re inyone other the | anada Individual Canada Indivi | prporation or other private groclosed. is attached. harge the required fee(s), or of cenclose an extra control of the control | redit any overpayment, to py of this form). R 1.27(g)(2). con identified above. assignee or other party in |

PTOL-85 (Rev. 07/05) Approved for use through 04/30/2007.

OMB 0651-0033 U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

on's Corner, VA 22102

elephone: (703) 637-1480 acsimile: (703) 637-1499 **KEATING & BENNETT LLP**



DEC 2 0 2005 8180 Greensboro Drive

| То: | Mail Stop ISSUE FEE | From: Joseph R. Keating | | |
|------|------------------------|-------------------------|--|--|
| Faxe | 571-273-2885 | Date: December 20, 2005 | | |
| Phon | e: 571-272-4200 | Pages: 3 | | |
| Re: | 09/808,684 | CC: | | |
| | 50626.19 | | | |
| | 50626.19 | | | |

Comments:

Please find attached hereto the following documents for the above-identified application:

- Fee Transmittal form; and
- · Credit card form.

Respectfully submitted,

Joseph R. Keating

for

Keating & Bennett, LLP (Registration Number 37,368)